

**Notification of Ownership Transfer**

Return completed form to: [maintpermitrecords@dot.state.al.us](mailto:maintpermitrecords@dot.state.al.us)

If available, a copy of the original permit should be included with the form when emailed to ALDOT.

For assistance in completing the form, please call (334) 242-6656.

**LOCATION INFORMATION:**

Permit Number: OA - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ County: \_\_\_\_\_

Sign Identification No.: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Latitude: \_\_\_\_\_ Longitude: \_\_\_\_\_

Date of Purchase: \_\_\_\_\_

**PART 1: TO BE COMPLETED BY THE SELLER (TRANSFEROR):**

Company's Name: \_\_\_\_\_ Seller's Name: \_\_\_\_\_

Seller's Address: \_\_\_\_\_

Seller's Email: \_\_\_\_\_ Seller's Phone Number: \_\_\_\_\_

**NOTE: THIS SECTION MUST BE EXECUTED BY THE SELLER (TRANSFEROR).** I HEREBY CERTIFY THAT IT IS MY INTENT THAT THE ABOVE-REFERENCED PERMIT(S) BE TRANSFERRED AND THAT I AM AUTHORIZED TO SIGN THIS REQUEST OF BEHALF OF THE SELLER.

\_\_\_\_\_  
(Signature of permit holder or representative)

\_\_\_\_\_  
(Position or title)

\_\_\_\_\_  
(Printed name of permit holder or representative)

\_\_\_\_\_  
(Date)

**Notary:**

State of \_\_\_\_\_

County of \_\_\_\_\_

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Notary Public

\_\_\_\_\_  
Date My Commission Expires

(SEAL IS REQUIRED)

**PART 2: TO BE COMPLETED BY THE BUYER (TRANSFEREE):**

Company's Name: \_\_\_\_\_ Buyer's Name: \_\_\_\_\_

Buyer's Address: \_\_\_\_\_

Buyer's Email: \_\_\_\_\_ Buyer's Phone Number: \_\_\_\_\_

Landowner Name: \_\_\_\_\_

Landowner Address: \_\_\_\_\_

I CERTIFY THAT I AM AUTHORIZED TO ACCEPT THE PERMIT TRANSFER ON BEHALF OF THE BUYER. I FURTHER CERTIFY THAT I HAVE OBTAINED THE WRITTEN PERMISSION OF THE PERSON IN LAWFUL CONTROL OF THE SITE ON WHICH THE SIGN IS LOCATED TO MAINTAIN AN OUTDOOR ADVERTISING PERMIT AT THAT LOCATION.

\_\_\_\_\_  
(Signature of transferee)

\_\_\_\_\_  
(Position or title)

\_\_\_\_\_  
(Printed name of transferee)

\_\_\_\_\_  
(Date)

**Notary:**

State of \_\_\_\_\_

County of \_\_\_\_\_

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Notary Public

\_\_\_\_\_  
Date My Commission Expires

(SEAL IS REQUIRED)